PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								POI-3684						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE				OTHER SMALL		
TOTAL CLAIMS			30					RATE	Ε	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		• 10		•	X\$ 9=			OR	X\$18=	180	
INDEPENDENT CLAIMS			7 minus 3 =		*			X42=			OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140-				+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2								+140= TOTAL			OR	TOTAL		
CLAIMS AS AMENDED - PART II								IOIA	` -	<u></u>	UH		THAN	
(Column 1) (Column 2) (Column 3)							_	OTHER THA SMALL ENTITY OR SMALL ENTIT						
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	. RAT	RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 30	Minus	** 3	O	= Ø,		X\$-9:	=		OR	X\$18=		
AME	Independent	· 3	Minus	***	3	= /	X42				OR	X84=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140:	=.		OR	+280=		
								TOT ADDIT, F			OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)											_			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=	<u>.</u>		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]		\neg			1200		
				+140: TOT			OR	+280= TOTAL						
									EE		OR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								- у	100:	1		155	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=]	X\$ 9:	=		OR	X\$18=		
	Independent	*	Minus	***		=-		X42=			OR	X84=		
Ľ	FIRST PRESE	LTIPLE DEPENDENT		T CLAIM	MI MI		-	1						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL	ļ		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR	ADDIT. FEE	L		
		nber Previously Pa					er fou	und in the	арр	propriate box	x in co	lumn 1.		